

**APPLICATION FOR A USE VARIANCE**  
**TOWN OF FISHKILL, COUNTY OF DUTCHESS, NEW YORK**

Application # **UV**

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APPLICANT: \_\_\_\_\_

COMPANY: \_\_\_\_\_

MAILING  
ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_

(If property is not owned by the applicant, the applicant must submit a statement by the property owner authorizing the applicant to appeal on his/her behalf.)

(OFFICE USE ONLY)	
Date of Receipt of Application: _____	
(Postmark or Hand Delivered)	
Application Fee: \$	Ck #
Escrow Fee: \$	Ck #
Date Mailed to the County: _____	
Date Given to ZBA Members: _____	
Date of Public Hearing: _____	
Date of ZBA Decision: _____	
Date of Filing of Decision with Town Clerk: _____	

OWNER OF PROPERTY (if different than applicant): \_\_\_\_\_

APPEAL CONCERNS PROPERTY AT THE FOLLOWING ADDRESS: (must be full street address)

TAX GRID NUMBER: #06 

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ZONING DISTRICT: \_\_\_\_\_ Date Applicant Acquired Property: \_\_\_\_\_

THE APPLICANT'S APPEAL FROM A DECISION OF THE ZONING ENFORCEMENT OFFICER, OR ON DIRECT APPEAL FROM THE PLANNING BOARD AS PERMITTED BY STATE LAW, CONCERNS THE FOLLOWING:

- \_\_\_\_\_ REFERRAL FROM TOWN OF FISHKILL PLANNING BOARD (ATTACH TO APPLICATION)
- \_\_\_\_\_ DENIAL OF AN APPLICATION FOR A BUILDING PERMIT (ATTACH TO APPLICATION)
- \_\_\_\_\_ DENIAL OF AN APPLICATION FOR A CERTIFICATE OF OCCUPANCY (ATTACH TO APPLICATION)
- \_\_\_\_\_ INTERPRETATION OF TOWN CODE CHAPTER: \_\_\_\_\_

FOR THE PROPOSED ACTIVITY: \_\_\_\_\_

DENIAL WAS BASED ON THE FOLLOWING SECTIONS OF THE ZONING CODE: \_\_\_\_\_

DATE OF ZONING ENFORCEMENT OFFICER'S DECISION: \_\_\_\_\_

STATE WHAT TYPE OF USE VARIANCE YOU ARE REQUESTING: \_\_\_\_\_

TEST: No use variance will be granted without showing by you (the applicant) that applicable zoning regulations and restrictions have caused unnecessary hardship. The following tests must be met for each and every use allowed by zoning on the property, including uses allowed by special use permit. Below please briefly describe how each of the four variance tests are met. Attach all supporting materials.

1. The applicant cannot realize a reasonable return, as shown by competent financial evidence. The lack of return must be substantial:

Proof:

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2. The alleged hardship relating to the property is unique. (The hardship may not apply to a substantial portion of the zoning district or neighborhood.):

Proof:

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3. The requested use variance, if granted, will not alter the essential character of the neighborhood:

Proof:

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4. The alleged hardship has not been self-created:

Proof:

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Is property within 500 feet of any of the following?

\_\_\_\_\_ Village of Fishkill, \_\_\_\_\_ Town of Wappinger, \_\_\_\_\_ Town of East Fishkill,  
\_\_\_\_\_ City of Beacon \_\_\_\_\_ I - 84,  
\_\_\_\_\_ State or County Rd (Route 9, 52, DC-36, DC-34 etc...)  
\_\_\_\_\_ State park or other recreation area,  
\_\_\_\_\_ existing or proposed right - of - way of any stream, creek or river  
\_\_\_\_\_ Wetlands or wetland buffer zones

**Application Check List:**

\_\_\_\_\_ Check made to the Town of Fishkill for the Application Fee (\$250.00 Residential or \$350.00 Commercial)  
\_\_\_\_\_ Check made to the Town of Fishkill for the Escrow Deposit (\$500.00)

Need One (1) Original and 12 Copies of the Following

\_\_\_\_\_ Application (Complete with professional drawings and plot plans)  
\_\_\_\_\_ Denial Letter for Building Permit (or Referral Letter from Planning Board)  
\_\_\_\_\_ Owners consent letter (if necessary)

Applicant's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

